

#10
Amend
a
9.26.03
afg

I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS BEING
TRANSMITTED BY FACSIMILE TO THE UNITED STATES PATENT
AND TRADEMARK OFFICE ON September 17, 2003.

Name of Person Making Transmission: Karen Cing-Mars

Signature: Karen Cing-Mars

Date of Signature: 9/17/03

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:
Yun-Yu Wang *et al.*

Examiner: O. Nadav

Application No.: 09/874,145

Group Art Unit: 2811

Filed: June 5, 2001

For: METHOD FOR PRODUCING A
FLAT INTERFACE FOR A
METAL-SILICON CONTACT
BARRIER FILM

Date: September 17, 2003

REPLY AND AMENDMENT UNDER 37 C.F.R. § 1.111

The Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313

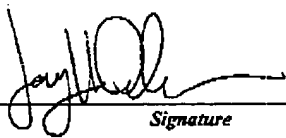
Sir:

In reply to the Office Action dated June 17, 2003, please amend the above-identified application as follows:

FIS9-1997-0266-US4

-1-

Appln. No. 09/874,145

AMENDMENT TRANSMITTAL LETTER (Large Entity)			Docket No. FIS919970266US4		
Applicant(s): Yun-Yu Wang et al.					
Serial No. 09/874,145	Filing Date 06-05-01	Examiner Ori Nadav	Group Art Unit 2811		
Invention: METHOD FOR PRODUCING A FLAT INTERFACE FOR A METAL-SILICON CONTACT BARRIER FILM					
RECEIVED CENTRAL FAX CENTER					
<u>TO THE COMMISSIONER FOR PATENTS:</u>					
SEP 22 2003					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	18 -	26 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	1 -	3 =	0 x	\$84.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
OFFICIAL					
<input checked="" type="checkbox"/> No additional fee is required for amendment.					
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____					
<input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 09-0458					
<input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.					
<input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
<div style="display: flex; justify-content: space-between; align-items: flex-end;"><div style="text-align: center;"> _____ Signature</div><div style="text-align: right;">Dated: <i>17. September 2003</i></div></div>					
<div style="display: flex; justify-content: space-between;"><div>Jay H. Anderson Registration No. 38,371 Telephone No. 845-894-3667 Fax No. 845-892-6363</div><div style="text-align: right;">I CERTIFY THAT THIS DOCUMENT IS BEING FACSIMILE TRANSMITTED TO THE USPTO ON THE DATE SHOWN BELOW: Date of Transmission: <i>9/17/03</i> Name of Person Making Transmission: <i>Karen Cinq-Mars</i> Signature: <i>Karen Cinq-Mars</i></div></div>					
cc:					

FACSIMILE TRANSMISSION TO USPTO

CERTIFICATION OF FACSIMILE TRANSMISSION:

I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS BEING
FACSIMILE TRANSMITTED TO THE USPTO ON THE DATE SHOWN
BELOW:

Date of Transmission: September 17, 2003

Name of Person

Making Transmission: Karen Cinq-Mars

Signature:

Karen Cinq-Mars 9/17/03

DOCUMENT(S) FAXED: (MARKED WITH X)

10 PAGES ATTACHED

Re Applic of	Yun-Yu Wang et al.
Docket No.	FIS9-1997-0266US4
Serial No.	09/874,145
Filing Date	06-05-01
Attorney	Jay H. Anderson

Attached: Amendment

PLEASE DELIVER TO:

EXAMINER: **Ori Nadav**
ART UNIT: **2811**
PHONE NO: 703-308-8138
FAX NO: 703-872-9318

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